## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20					RATE	FEE	OR			
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	+	7_	RATE BASIC FEE	FEE 770.00	
╟┰	OTAL CHARGE	ABLE CLAIMS	200 0	inus 20=	. 0				- 000.00	OR			
, N	DEPENDENT (	CI AIMS	10		• /			X\$ 9=	↓	OR	X\$18=		
І—		NDENT CLAIM F	ninus 3 =				X43=		OR	X86=	86		
								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	856	
4	(Column 1) (Column 2) (Column 3							SMALL ENTITY OR			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE	ER	PRESENT EXTRA			ADDI-	7	-	ADDI-	
				PREVIO PAID F				RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 18	Minus	-20		=		X\$ 9=		OR	X\$18=	?	
	Independent	ENTATION OF M	Minus	DENIDENT	C: 4114	=		X43=		OR	X86=		
<u> </u>	FINOT FRES	ENTATION OF M	OLTIPLE DE	PENDENI	CLAIM			+145=		OR	+290=		
			•			٠.	L	TOTAL	<u> </u>	OR	TOTAL		
		A	DDIT. FEE	·	10	ADDIT. FEE							
8	_	CLAIMS REMAINING		HIGHE		(Column 3)	ſ		ADDI-	1 [		ADDI-	
ENT		AFTER AMENDMENT		PREVIOU PAID F	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT B	Total	•	Minus	**				X\$ 9=		OR	X\$18=		
	Independent	+	Minus	***		-	-	X43=		OR	X86=		
	FINST PRESE	NTATION OF ML	LTIPLE DEF	PENDENT	CLAIM		ľ	+145=		OR	+290=		
	·							TOTAL		L	TOTAL		
	(Caluma 4)								<u></u> _	OR A	DDIT. FEE		
,,]	`	(Column 1) CLAIMS		(Columi HIGHE:	ST ]	(Column 3)	_			_			
ᇎ		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA			ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total		Minus	**		=	H	X\$ 9=	FEE	}	X\$18=	FEE	
	Independent	•	Minus	***			$\vdash$			OR			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43≃		OR	X86=		
+145= OR +290=											l		
11	* If the intry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								· .	OR A	TOTAL		
T	he Highest Num	nber Previously Paid ber Previously Paid	is ror in THIS For (Total or	SPACE is la Independent	ess than ) is the I	3, enter "3." lighest number		DIT. FEE	opriate box				